

**PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS**

DUE DATE MARCH 1st

CALL YOUR CITY/TOWN FOR INCOME AND ASSET LIMITS

There is a separate page of instructions (pages 3 & 4) that accompany this form. If you do not receive the instructions, please visit our web site at [www.revenue.nh.gov](http://www.revenue.nh.gov) or contact your city/town.

<b>STEP 1 NAME AND ADDRESS</b>	PROPERTY OWNER'S LAST NAME		FIRST NAME		INITIAL	PROPERTY OWNER'S NAME
	PROPERTY OWNER'S LAST NAME		FIRST NAME		INITIAL	
	MAILING ADDRESS					
	CITY/TOWN		STATE	ZIP CODE		
	CITY/TOWN TAX MAP #		LOT #	BLOCK #		
<b>STEP 2 VETERAN'S TAX CREDITS/ EXEMP- TION</b>	1 Date of Entry into Military Service during War/Conflict		2 Date of Discharge/Release from Military Service during War/Conflict			PROPERTY OWNER'S NAME
	3 Veteran's Administration (VA) File Number (if any)					
	4 <input type="checkbox"/> Veteran		<input type="checkbox"/> Veteran's Tax Credit			
	<input type="checkbox"/> Spouse		<input type="checkbox"/> Credit for Service Connected Total and Permanent Disability			
	<input type="checkbox"/> Surviving Spouse		<input type="checkbox"/> Credit for Surviving Spouse of Veteran Who Was Killed or Died on Active Duty			
	Veteran of Allied Country					
	5 Name of Allied Country Served in _____		6 Branch of Service _____			
<b>STEP 3 OTHER EXEMP- TIONS</b>	7 <input type="checkbox"/> US Citizen at time of entry into the Service		8 <input type="checkbox"/> Alien but Resident of NH at time of entry into the Service			PROPERTY OWNER'S NAME
	9 Does any other eligible Veteran own interest in this property? <input type="checkbox"/> No <input type="checkbox"/> Yes If <b>YES</b> , give name _____					
	10 <input type="checkbox"/> Total Veteran Exemption		<input type="checkbox"/> (a) Veteran		<input type="checkbox"/> (b) Surviving Spouse of that Veteran	
	11 <input type="checkbox"/> Elderly Exemption Applicant's Date of Birth _____ Spouse's Date of Birth _____ Must be 65 years of age on or before April 1st of year for which exemption is claimed.					
	12 <input type="checkbox"/> Disabled Exemption		<input type="checkbox"/> Solar Energy Systems Exemption			
<b>STEP 4 IMPROVE- MENTS</b>	<input type="checkbox"/> Blind Exemption		<input type="checkbox"/> Woodheating Energy Systems Exemption			TAX MAP/LOT/BLOCK
	<input type="checkbox"/> Deaf Exemption		<input type="checkbox"/> Wind-Powered Energy Systems Exemption			
<b>STEP 5 RESIDENCY</b>	14 <input type="checkbox"/> NH Resident for one year preceding April 1st in the year in which the tax credit is claimed (Veteran's Credit)					TAX MAP/LOT/BLOCK
<input type="checkbox"/> NH Resident for <b>Five Consecutive Years</b> preceding April 1st in the year the exemption is claimed (Elderly & Deaf Exemptions)						
<b>STEP 6 OWNERSHIP</b>	15 Do you own 100% interest in this residence? <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>NO</b> , what percent (%) do you own? _____					TAX MAP/LOT/BLOCK
<b>STEP 7 SIGNA- TURES</b>	Under penalties of perjury, I hereby declare that the above statements are true.					TAX MAP/LOT/BLOCK
	SIGNATURE (IN INK) OF PROPERTY OWNER				DATE	
	SIGNATURE (IN INK) OF PROPERTY OWNER				DATE	
<b>WHEN TO FILE</b>	<p><b>Deadline:</b> Form PA-29 must be filed by March 1st following the date of notice of tax. Example: If you are applying for an exemption off your 2003 property taxes, which are due no earlier than December 1, 2003, then you have until March 1, 2004, to file this form.</p> <p>The assessing officials shall send written notice advising the taxpayer of their decision to grant or deny the request for exemption by July 1st. Failure of the assessing officials to respond shall constitute a denial of the application.</p> <p><b>Elderly Exemption ONLY:</b> If the city/town voted to change the filing date to August 1st, the Form PA-29 must be filed by August 1st prior to the setting of the tax rate.</p> <p><b>A late response or a failure to respond by assessing officials does not extend the appeal period.</b></p> <p>Date of filing is when the completed application form is either hand delivered to the city/town, postmarked by the post office, or receipted by an overnight delivery service.</p>					TAX MAP/LOT/BLOCK
<b>APPEAL PROCE- DURE</b>	<p>If an application for a property tax exemption or tax credit is denied, an applicant may appeal in writing on or before <b>September 1st</b> following the date of notice of tax under RSA 72:1-d to the New Hampshire Board of Tax and Land Appeals (BTLA) or to the Superior Court. Example: If you were denied an exemption from your 2003 property taxes, you have until September 1, 2004, to appeal.</p> <p>Forms for appealing to the BTLA may be obtained from the NH BTLA, 107 Pleasant Street, Concord, NH 03301, their web site at <a href="http://www.nh.gov/btla">www.nh.gov/btla</a> or by calling (603) 271-2578. Be sure to specify <b>EXEMPTION APPEAL</b>.</p>					

**PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS**

TO BE COMPLETED BY CITY/TOWN ASSESSING OFFICIALS

**MUNICIPAL AUTHORIZATION**

CITY/TOWN TAX MAP #	LOT #	BLOCK #
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VETERAN'S TAX CREDIT		Granted	Denied
<input type="checkbox"/> Veteran's Tax Credit \$50	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Service Connected Total & Permanent Disability \$700	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Surviving Spouse of Veteran Who Was Killed or Who Died on Active Duty \$700	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Review Discharge Papers <input type="checkbox"/> Other Information _____			

  

VETERAN'S EXEMPTION		Granted	Denied
<input type="checkbox"/> Total Exemption	<input type="checkbox"/> (a) Veteran <input type="checkbox"/> (b) Surviving Spouse	<input type="checkbox"/>	<input type="checkbox"/>

  

APPLICABLE ELDERLY AND DISABLED EXEMPTION (OPTIONAL) INCOME AND ASSET LIMITS				
Income Limits	65 - 74 years of age	75 - 79 years of age	80 + years of age	Disabled Exemption
Single	\$ _____	\$ _____	\$ _____	\$ _____
Married	\$ _____	\$ _____	\$ _____	\$ _____
Assets Limits	65 - 74 years of age	75 - 79 years of age	80 + years of age	Disabled Exemption
Single	\$ _____	\$ _____	\$ _____	\$ _____
Married	\$ _____	\$ _____	\$ _____	\$ _____

  

OTHER EXEMPTIONS		Granted	Denied
<input type="checkbox"/> Elderly Exemption	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Disabled Exemption	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Improvements to Assist the Deaf	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Improvements to Assist Persons with Disabilities	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Blind Exemption	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Deaf Exemption	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Solar Energy Systems Exemption	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Woodheating Energy Systems Exemption	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Wind-Powered Energy Systems Exemption	Optional Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>

  

**A photocopy of this page must be returned to the property owner after approval or denial before July 1st.**

The following documentation may be requested at the time of application in accordance with RSA 72:34, II:

- ☐ List of assets, value of each asset, net encumbrance and net value of each asset.
- ☐ \* Statement of applicant and spouse's income.
- ☐ \* Federal Income Tax Form.
- ☐ \* State Interest and Dividends Tax Form.
- ☐ \* Property Tax Inventory Form filed in any other town.

\* **Documents are considered confidential and are returned to the applicant at the time a decision is made on the application.**

  

Municipal Notes
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Selectmen/Assessor(s) Printed Name	Signatures(s) of Approval (in ink)	Date

**PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS****GENERAL INSTRUCTIONS**

<b>WHERE TO FILE</b>	File with your city/town of primary residency by March 1st.
<b>WHO MAY FILE</b>	Applicant must be qualified as of April 1st of the year the exemption and/or tax credit is claimed. Financial qualifications required for certain exemptions must be met by the time of application. An applicant must have resided in this state for at least one year preceding April 1st, in the year in which the veterans' tax credit, improvements to assist persons with disabilities exemption, and/or blind exemption. An applicant must have resided in this state for at least five years preceding April 1st in the year in which the elderly or disabled exemption is claimed. The terms owner, own or owned, shall include those persons who hold equitable title or the beneficial interest for life in the property.
<b>CREDITS</b>	Applicant should note that <b>credits</b> approved will be applied as a credit toward their property tax amount due as reported on their property tax bill.
<b>EXEMPTIONS</b>	Applicant should note that <b>exemptions</b> approved are deducted from the amount of the property owner's total assessed value prior to the calculation of tax due.
<b>ELDERLY EXEMPTIONS RSA 72:39-a RSA 72:33-b</b>	Applicant must have resided in this state for at least 5 consecutive years preceding April 1st in the year which the exemption is claimed. Property must be: owned by a resident; or owned by a resident jointly or in common with the resident's spouse, either of whom meets the age requirement for the exemption claimed; or owned by a resident jointly or in common with a person not the resident's spouse, if the resident meets the applicable age requirement for the exemption claimed; or owned by a resident, or the resident's spouse, either of whom meets the age requirement for the exemption claimed, and when they have been married for at least 5 years. Property cannot have been transferred to the applicant, from a person under the age of 65, and related to the applicant by blood or marriage, within the preceding five years. Property must meet the definition of residential real estate, per RSA 79:39-a(c), which includes the housing unit, which is the person's principal home and related structures such as a detached garage or woodshed. It does not include attached dwelling units and unattached structures used or intended for commercial or other non-residential purposes. For Proration see RSA 72:41.
<b>ELDERLY &amp; DISABLED FINANCIAL QUALIFICATIONS RSA 72:39-a RSA 72:37-b</b>	<b>INCOME LIMITATION</b> Includes Income from any source including Social Security or pension.  Excludes Life insurance paid on the death of an insured; Expenses and costs incurred in the course of conducting a business enterprise; Proceeds from the sale of assets.
	<b>ASSET LIMITATION</b> Includes The value of all assets, tangible and intangible.  Excludes The value of the person's actual residence and the land upon which it is located up to the greater of 2 acres or the minimum family residential lot size specified in the local zoning ordinance. The value of any good faith encumbrances.
<b>ADA COMPLIANT</b>	Individuals who need auxiliary aids for effective communications in programs and services of the New Hampshire Department of Revenue Administration are invited to make their needs and preferences known. Individuals with hearing or speech impairments may call TDD Access: Relay NH 1-800-735-2964.

**LINE-BY-LINE INSTRUCTIONS**

<b>STEP 1 NAME &amp; ADDRESS</b>	Please type or print the property owner(s) name and address in the spaces provided. Also, enter the Tax Map, Lot and Block numbers.
<b>STEP 2 VETERAN'S TAX CREDIT/ EXEMPTION</b>	Line 1 Enter the date of entry into military service during war/conflict. Line 2 Enter the date of discharge or release from military service during war/conflict. Line 3 Enter the Veteran's Administration file number, if applicable. Line 4 Check the box or boxes that apply to indicate whether you are a veteran, veteran's spouse or surviving spouse of a veteran and what type of credit(s) you are applying for. Line 5 Enter the name of the Allied Country in which you served, if applicable. Line 6 Enter the Branch of Service that you served in. Line 7 Check the box if you were a US citizen at the time of entry into the service. Line 8 Check the box if you were an alien but a resident of NH at the time of entry into the service. Line 9 Check the appropriate box to indicate if another veteran owns an interest in this property. If yes, provide name. Line 10 Check the appropriate box(es) to indicate whether you are applying for a total veteran's exemption.
<b>STEP 3 OTHER EXEMP- TIONS</b>	Line 11 If an elderly exemption is requested, check that box and enter the applicant's date of birth. And if appropriate, enter the spouse's date of birth. Line 12 Check the appropriate box or boxes to indicate the exemption(s) you are applying for.
<b>STEP 4 IMPROVE- MENTS</b>	Line 13 Check the box if your property has improvements to assist persons with disabilities or to assist the deaf.
<b>STEP 5 RESIDENCY</b>	Line 14 Check the box or boxes to indicate that you meet the minimum resident time requirements listed.
<b>STEP 6 OWNERSHIP</b>	Line 15 Check the box indicating whether or not you own 100% of the property. If no, give the percentage that you do own.
<b>STEP 7 SIGNATURES</b>	All property owners must sign in ink. Attach additional pages with owners signatures if there are more than two owners of record.

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION  
**PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS**

TYPE OF CREDIT OR EXEMPTION	AMOUNT	WHO MAY APPLY
<b>STANDARD TAX CREDIT</b> RSA 72:28	\$50 (\$51-\$500 if RSA 72:28-a is adopted) is subtracted from the taxes due on the applicant's <b>RESIDENTIAL</b> property occupied as veteran's principle place of abode. For Veteran's surviving spouse: See RSA 72:28 II. For Proration: See RSA 72:30.	Every resident who served in the armed forces in any of the qualifying wars or armed conflicts, as listed in RSA 72:28, and was honorably discharged; or the spouse or surviving spouse of such resident.
<b>SURVIVING SPOUSE TAX CREDIT</b> RSA 72:29-a	\$700 (\$701-\$2000 if RSA 72:29-b is adopted) is subtracted from taxes due on the applicant's property, whether residential or not.	The surviving spouse of any person who was killed or died while on active duty in the armed forces, as listed in RSA 72:28, so long as the surviving spouse does not remarry.
<b>SERVICE-CONNECTED TOTAL DISABILITY TAX CREDIT</b> RSA 72:35	\$700 (\$701-\$2000 if RSA 72:35-a is adopted) is subtracted from the property taxes due on the applicant's residential property.	Any person who: -- has been honorably discharged and who has a total and permanent service-connected disability; <b>OR</b> -- is a double amputee or paraplegic because of the service-connected injury; <b>OR</b> -- is the surviving spouse of above qualified veteran and has not remarried.
<b>EXEMPTION FOR CERTAIN DISABLED SERVICEMEN</b> RSA 72:36-a	"...shall be exempt from all taxation on said homestead..."	Any person, who: -- is discharged from the military services of the U.S. under conditions other than dishonorable, or an officer who is honorably separated from military service; <b>AND</b> -- is totally and permanently disabled from service connection and satisfactory proof of such service connection is furnished to the assessors; <b>AND</b> -- is a double amputee of the upper or lower extremities or any combination thereof, paraplegic, or has blindness of both eyes with visual acuity of 5/200 or less as the result of service connection; <b>AND</b> -- owns a specially adapted homestead which has been acquired with the assistance of the Veterans Administration or owns a specially adapted homestead which has been acquired using proceeds from the sale of any previous homestead which was acquired with the assistance of the Veterans Administration.

**IMPROVEMENTS TO ASSIST PERSONS WITH DISABILITIES AND THE DEAF**

EXEMPTION	AMOUNT OF EXEMPTION	WHO MUST APPLY
<b>IMPROVEMENTS TO ASSIST PERSONS WITH DISABILITIES</b> RSA 72:37-a and RSA 72:38-b	The value of improvements made for the purpose of assisting a person with a disability or deafness is deducted from the assessed value of the residential real estate.	Any person owning residential real estate upon which he resides and to which he has made improvements for the purpose of assisting a person with a disability or deafness who also resides on such real estate.

**THE OPTIONAL EXEMPTIONS BELOW MUST BE ADOPTED BY THE MUNICIPALITY BEFORE ANYONE MAY APPLY**

EXEMPTION	AMOUNT OF EXEMPTION	WHO MAY APPLY
<b>BLIND EXEMPTION</b> RSA 72:37	\$15,000 (unless the city/town votes an increase) is subtracted from the assessed valuation.	Every inhabitant owning residential real estate, who is legally blind, as determined by the administrator of blind services of the vocational rehabilitation division of the education department.
<b>DEAF EXEMPTION</b> RSA 72:38-b	\$15,000 (unless the city/town votes an increase) is subtracted from the assessed valuation.	NH Residents who are deaf or severely hearing impaired and have been a NH resident for more than 5 consecutive years and meet the income requirements.
<b>SOLAR ENERGY SYSTEMS</b> RSA 72:61	Determined by vote of the city/town, per RSA 72:63.	Any person owning real property equipped with a solar energy heating or cooling system, as defined in RSA 72:61.
<b>WOODHEATING ENERGY SYSTEMS</b> RSA 72:69	Determined by vote of the city/town, per RSA 72:71.	Any person owning real property equipped with a woodheating energy system, as defined by RSA 72:69.
<b>WIND-POWERED ENERGY SYSTEMS</b> RSA 72:65	Determined by vote of the city/town, per RSA 72:67.	Any person owning real property equipped with a wind-powered energy system, as defined by RSA 72:65.
<b>DISABLED</b> RSA 72:37-b RSA 72:37-c	Amount of the exemption, and the level of income and assets (excluding the value of the property owner's residence) are determined by vote of the city/town, per RSA 72:37-c.	Any person eligible under the Federal Social Security Act for benefits to the disabled, and who is a New Hampshire resident on April 1st of the year the exemption is claimed.  <b>NOTE: See Financial Qualifications on page 3.</b>

**STATEMENT OF QUALIFICATION****For Property Tax Credit or Exemption Under RSA 72:33,V**

(to be submitted with Form PA-29)

**USE THIS FORM ONLY IF YOUR PROPERTY IS HELD IN A TRUST**

<b>WHO</b>	To be completed by property owners wishing to establish their status as holding equitable title/the beneficial interest owner of a trust, or holding a life estate in a property.
<b>WHY</b>	Chapter 102, Laws of 1994 has made it possible for a property owner to put their property into a trust or life estate and still be eligible for the property tax credit or exemption for which they were qualified.
<b>WHEN</b>	This completed form shall be submitted with the Permanent Application Form PA-29 (RSA 72:33) for property tax credit or exemption, to the local assessing officials of the City/Town in which such application is filed. The completed Form PA-33 becomes a permanent document and does not need to be refiled unless the status of the trust or life estate is changed or altered.

PLEASE TYPE OR PRINT	LAST NAME	FIRST NAME	INITIAL
	MAILING ADDRESS		
	CITY/TOWN	STATE	ZIP CODE
	LOCATION OF PROPERTY	ADDRESS	CITY/TOWN

I am eligible for a property tax credit or exemption against the property for which a Permanent Application Form PA-29, has been made, and do qualify as the owner of the property under 72:29,VI based upon the following: (Please Check One)

- ☐ Equitable title holder, life interest or beneficial interest owner of a trust.  
A copy of the Declaration of Trust, including a list of beneficiaries must accompany this statement.
- ☐ Life estate owner.  
A copy of the deed showing the assigned ownership of the life estate must accompany this statement.

Explanation or additional details:

I certify, under the penalty of perjury, that information I have provided above is true and correct:

SIGNATURE (IN INK)

DATE